(Caption of Case) Example: Application for a Class C Charter Certificate from John Doc dba Doe's Limo	TRANS TRANS DOCKET NUMBER: If this is your first to have a Docket Num	ime filing an application with the PSC, you will no ber. The Commission will assign one to you. If you Commission before, a Docket Number was assigned
(Please type or print) Submitted by: KELLY TOURS INC	Telephone:	912-964-2010
Address: #6 FINCH RD	Fax:	912-964-1006
HILTON HEAD SC 29926	Other:	
	Emai <u>l:</u>	
be filled out completely. NATURE OF ACTI	ON (Check all that ap	ply)
Application - Class A/A Restricted	☐ Re	quest for Name Change on Certificate
Application - Class C Taxi	Re	quest to Amend Scope of Authority
X Application - Class C Charter	Re	quest to Amend Tariff (rate increase, etc.)
Application - Class C Charter Bus	Re	quest to Amend Passenger Limit
Application - Class C Non-Emergency	Rec	quest
Application - Class C Stretcher Van	Ex.	hibit
Application - Class E Household Goods	Lat	te-Filed Exhibit
Application - Class E Hazardous Waste	Let	
		itter 🐪 💛
Application	Pro	oposed Order
Application	Pul	oposed Order
Application Request for Extension to Comply with Order Request for Order Granting Authority to Obtain a Certifica	Pulate Res	oposed Order blisher's Affidavit servation Letter
Application Request for Extension to Comply with Order Request for Order Granting Authority to Obtain a Certifica of Public Convenience and Necessity to be Rescinded	Pulate Res	oposed Order blisher's Affidavit servation Letter sponse

If you have any questions about this form, please contact the PUBLIC SERVICE COMMISSION at 803-896-5100.

PUBLIC SERVICE COMMISSION OF SOUTH CAROLINA

101 Executive Center Drive, Suite 100 Columbia, South Carolina 29210

(Mailing address: Post Office Drawer 11649, Columbia, SC 29211)

Phone: (803) 896-5100 Fax: (803) 896-5199

APPLICATION FOR CERTIFICATE OF PUBLIC CONVENIENCE AND NECESSITY FOR OPERATION OF MOTOR VEHICLE CARRIER

	Date:	6/14/2010			
LASS C - CHARTER					
pplication is hereby made for a Certificate of Public Convenies S.C. Code Ann., § 58-23-10, et seq. (1976), and amendments	nce and Nec thereto.	cessity, in accor	dance wit	h the pi	rovisio
Name under which business is to be conducted (corporation, partners)		proprietorship,	with or wit	thout tra	de name
KELLY TOUR	SINC			<u> </u>	
#6 FINCH				<u> </u>	
Street Address of A					
HILTON HEAD Mailing Address of Applicant if dif	SC 29926	street address			
			1006		
912-964-2010 Phone		912-964 Fax			
· None					
Email Addr	ess				
If incorporated, a copy of Articles of Incorporation must be a Secretary of State "Foreign Corporation" Certificate.)	ttached. (If	incorporated o	utside of S	SC, atta	ch SC
Select Entity Type: (Check one) Individual Owner/Sole Proprietorship					
Partnership - List names and address of all person having	g an interes	st in the busines	SS.		
Corporation - List names and addresses of two principal			Z.:		
DON ADAMS 2788 HWY 80 SAVANNAH GA 31408			ìή 		
			 		
	·				
1 of 9					

Kelly Tours, Inc. Profit & Loss

Drdinary Income/Expense Income Bad Checks 988.00 Commissions Pd 913.05 Fees 30.00 Gross Bus Income Kelly Tours Internal 166,100.00 Gross Bus Income Cher 89,365.00 Total Gross Bus Income 255,465.00 Interest Earned 0.71 K-Shuttle 91,266.50 KT Bus Charter Payment 111,124.00 Reimbursed Expenses 39,102.68 Trip Payment 2009 100.00 2010 1,324,580.54 Total Income 1,823,569.48 Cost of Goods Sold Bus Charter Coastline Travel 1,950.00 Kelly Tours Transportation Transouth Motorocach 2,800.00 Total Bus Charter Cott of Tour Group Admission 220,416.74 Airline Tickets 40,412.50 Bus Permit 937.28 Cruise 34,324.98 Lodging 194,724.73 Meals 59,568.57 Security 3,628.38 Tours Transportation 1,643.55 Transportation 36,239.83 Cost of Tour Group Cost of Tour Group Cost of Tour Group 1,643.55 Transportation 36,239.83 Cost of Tour Group 6,435 Transportation 36,239.83 Cost of Tour Group 608,352.89 Emergency Checks 1,664.35 Transportation 36,239.83 Cost of Tour Group 608,352.89 Emergency Checks 1,664.35 Transportation 36,239.83 Cost of Tour Group 608,352.89 Emergency Checks 1,664.35 Transportation 36,239.83 Cost of Tour Group 608,352.89 Emergency Checks 3,630.59 TShirt Expense 11,696.60 Trip Expense Reimbursement 5,476.82 Trip Supplies 13,996.23 Total COGS 678,800.45 Gross Profit 1,144,769.03 Expense Advertising and Promotion 10,233.07 Advertising and Promotion 200.00		Jan - Apr 10
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Expense Advertising & Promotion 10,233.07		678,800.45
Advertising & Promotion 10,233.07	Gross Profit	1,144,769.03
Advertising & Promotion 10,233.07	Expense	
Advertising and Promotion 200.00	Advertising & Promotion	
	Advertising and Promotion	200.00

Page

Kelly Tours, Inc. Profit & Loss

	Jan - Apr 10
Automobile Gas Insurance Tag Automobile - Other	1,925.51 9,160.22 2,653.12 11,088.02
Total Automobile	24,826.87
Bank Service Charges Building Maintenance Lawn Care Building Maintenance - Other	12,470.08 1,030.00 3,694.30
Total Building Maintenance	4,724.30
Bus Driver Expenses Driver Per Diern Fuel Office Staff Parts & Equipment Repairs & Maintenance Supplies Bus - Other	70.00 9,281.27 69,997.04 23.48 18,915.08 190.39 1,527.62 2,436.10
Total Bus	102,440.98
Business Licenses and Permits Charitable Contributions Computer/Internet Contract Labor Cost of Tour Cost of tour Lodging Credit Card Fees Director's Personal Expenses Dues and Subscriptions Employee Expenses Driver Fees Driver Per Diem Driver Preemployment Screening Lodging for Driver Violations Driver Fees - Other	792.50 2,000.00 3,519.44 20,193.36 5,902.10 150.00 13,804.64 5,774.05 1,032.00 11,817.54 1,213.00 3,008.08 13.75 100.00
Total Driver Fees	16,152.37
Total Employee Expenses Equipment Rental Gross Bus Expense Bus Fuel	16,152.37 4,090.89
Fuel Tax	1,259.64
Total Bus Fuel Bus Supplies Bus#277 Bus#577 Leased Vehicles	1,259.64 587.14 13,191.96 16,239.00
Bus#577 Caterpillar Lease	5,413.00

Page:

Kelly Tours, Inc. Profit & Loss

	Jan - Apr 10
Bus#677 Key Finance Lease	21,412.00
Total Leased Vehicles	26,825.00
Outsourced Charters Repairs and Maintenance	155.00
Tire Repair Repairs and Maintenance - Other	10,810.53 10,361.82
Total Repairs and Maintenance	21,172.35
Gross Bus Expense - Other	200.00
Total Gross Bus Expense	79,630.09
Insurance Bus Dental Flood Insurance Genral Liability Insurance Health Savings Life Medical Property Worker's Compensation Insurance - Other	4,649.02 335.76 1,505.00 4,380.00 4,931.74 1,184.60 1,583.82 656.24 1,364.00 4,649.02
Total Insurance	25,239.20
Interest Credit Cards Loan Interest The Coastal Bank LOC 401114	7,520.01 10,772.56
Total Loan Interest	10,772.56
Loans Bus#277 Caterpillar Loan	8,955.84
Total Loans	8,955.84
Interest - Other	600.00
Total Interest	27,848.41
Kelly Tours Trip Expenses Kelly Transportation Licenses and Permits Meals and Entertainment Miscellaneous Office Supplies Officer Salary Parking Parking Lot Payroll Expenses Postage and Delivery Printing and Reproduction Professional Fees Accounting Professional Fees - Other	2,688.00 163,850.00 90.00 440.65 480.20 2,770.77 24,800.00 5,228.36 1,400.00 67,447.84 3,181.02 9,110.98
Total Professional Fees	5,295.43

Page:

PM e 14, 2010 rual Basis

Kelly Tours, Inc. Profit & Loss

	Jan - Apr 10
Public Relations Reconciliation Discrepancies Reimbursement Reimbursed Trip Expenses Reimbursement - Other	1,766.92 -9,909.74 2,628.79 2,925.06
Total Reimbursement	5,563.85
Rent Repairs Building Repairs	20,000.00
Total Repairs	1,547.55
Salaries-Other Service Charges Subscription Taxes	140,753.05 340.25 150.00
Property Taxes & Licenses Taxes - Other	31.39 1,422.75 3,712.74
Total Taxes	5,166.88
Teachers Expense Telephone Cell Phones Telephone - Other	4,645.87 5,097.83
Total Telephone	9,743.70
Tolls Travel & Ent Meals	165.50 95.32
Total Travel & Ent	95.32
Trip Refund Trip Refunds	25,476.9 4 1,238.87
Utilities Alarm Gas and Electric Trash Removal Water Utilities - Other	179.70 3,344.78 450.50 250.50 12.39
Total Utilities	4,237.87
Total Expense	854,145.01
Net Ordinary Income	290,624.02
Net Income	290,624.02

PROPOSED RATES AND CHARGES FOR SERVICE

52000=/day

Maximum Proposed Rates and Charges for Service are as follows:

7ax: 803-896-5199

Counties to be Served:

BEAUFORT

JASPER

ALLENDALE

COLLETON

Maximum Number of Passengers per Vehicle: 4 PASSENGERS

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DESCRIPTION OF EQUIPMENT

MAKE	YEAR & MODEL	VIN#	WEIGHT EMPTY	SEATING CAPACITY
LINC	2007 TOWN CAR	1LNHM84W97Y628165	Mar. 11, page 11, 11	4 PASS
LINC	2005 TOWN CAR	1LNHM84W05Y650780		4 PASS
CHRY	2005 SEDAN	2C3JA53G25H616717		4 PASS
				10
			1,000	

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INSURANCE QUOTE

	•
	KELLY TOURS INC
	Name of Motor Carrier
#6 FINC	TH RD HILTON HEAD SC 29926
W C Z Z	Address of Motor Carrier
mount of Premium:	Limits Ouoted: (See Below)
iability Insurance s 7,227	Limits
he above quoted premium is for a term of	12 months.
Minimum Limits - Intrastate Only: 1-7 Passengers 8-15 Passengers	\$ 25,000/\$0,000/25,000 \$ 25,000/100,000/25,000
National Interstate 3250 Interstate Dr. F	Tosurance Company Name of Insurance Company Sichfield, OH 44286 me Office Address of Company
I am familiar with the Commission's Rules a meets the minimum insurance limits prescrib South Carolina Department of Insurance to d	and Regulations relating to insurance requirements and the above quote bed. The insurance company making this quote is authorized by the do business in South Carolina.
•	
Clicha	ME B
G/15/10	Authorized Insurance Company Representative's Signature
The insurance quote must be complete, listing of the insurance quote must be complete, listing of the insurance policies may be required. Do not be required.	Authorized Insurance Company Representative's Signature national insurance premiums. At the discretion of the Commission, a copy of not provide a copy of insurance policies unless requested.
Date The insurance quote must be complete, listing contrent insurance policies may be required. Do n	

Exhibit FWA

	KELLY TOURS INC
	Name of Applicant
1.	Are there currently any outstanding judgments against the Applicant?
	○ Yes
	If Yes, indicate nature of judgement(s) against applicant.
2.	Is Applicant familiar with all statutes and regulations, including safety regulations and governing for-hire moto carrier operations in South South Carolina, and does Applicant agree to operate in compliance with these statutes and regulations?
3.	Is Applicant aware of the Commission's insurance requirements and the insurance premium costs associated therewith?

6 of 9

O No

Yes

Exhibit on Driver Qualifications

1.	Applic	cant understands that a	ll dī	ivers must be a minimum of 18 years of age.
	•	Yes	0	No
2.	and su	cant understands that a ich record from the Di intained in the Applica	MV	tified copy of the driver's three (3) year driving record issued by the SC DMV of the state in which the driver is or has been domiciled for such period must business office.
	•	Yes	0	No
3.	Appli must	cant understands that a be maintained in the A	a cri	minal history background check from the state where the driver currently lives cant's business office.
	•	Yes	0	No
4.	their	icant understands that possession when opera of residence of the driv	ating	rivers operating a vehicle under a Class C Charter Certificate must have in a charter vehicle, a valid driver's license issued by the SC DMV or the current
	•	Yes	0	No
5.	vehic State	les to drivers who are	regi	Class C Charter Certificate holders are prohibited from employing or leasing stered, or required to be registered, as sex offenders with the South Carolina n or any national registry of sex offenders. No

7 of 9

PUBLIC SERVICE COMMISSION OF SOUTH CAROLINA POST OFFICE DRAWER 11649 COLUMBIA, SOUTH CAROLINA 29211

Applicant is familiar with the provision of S.C. Code Ann. §58-23-10, et seq.(1976), and amendments thereto, and R.103-100 through R.103-241 of the Commission's Rules and Regulations for Motor Carriers (Vol.26, S.C. Code Ann., 1976), and R.38-400 through 38-503 of the Department of Public Safety's Rules and Regulations for Motor Carriers (Vol.23A, S.C. Code Ann., 1976) and amendments thereto, and hereby promises compliance therewith.

STATE OF	SOUTH CAROLINA) OF COLLETON)	Wayer Hulliam Applicant's Signature			
		Арриеми з отдившо			
I,	WARREN HICKMAN Name of Applicant's Representative	GENERAL MANAGER Title			
	••	I TO DIC			
of	KELLY TO Applic				
the Applicant for the Certificate of Public Convenience and Necessity as set forth in the foregoing, swear or affirm that all statements contained in the above application are true and correct.					
		Mary Paul			
		Signature of Applicant's Representative			

8 of 9

This

Notary Public

Commission Expires

SWORN TO BEFORE ME

My Commission Expires

March 1, 2017

day of

STATE OF GEORGIA

Secretary of State

Corporations Division
315 West Tower
#2 Martin Luther King, Jr. Dr.
Atlanta, Georgia 30334-1530

CERTIFICATE OF EXISTENCE

I, Karen C Handel, Secretary of State and the Corporations Commissioner of the state of Georgia, hereby certify under the seal of my office that

KELLY TOURS, INC.

Domestic Profit Corporation

was formed or was authorized to transact business on 07/01/1996 in Georgia. Said entity is in compliance with the applicable filing and annual registration provisions of Title 14 of the Official Code of Georgia Annotated and has not filed articles of dissolution, certificate of cancellation or any other similar document with the office of the Secretary of State.

This certificate relates only to the legal existence of the above-named entity as of the date issued. It does not certify whether or not a notice of intent to dissolve, an application for withdrawal, a statement of commencement of winding up or any other similar document has been filed or is pending with the Secretary of State.

This certificate is issued pursuant to Title 14 of the Official Code of Georgia Annotated and is prima-facie evidence that said entity is in existence or is authorized to transact business in this state.



WITNESS my hand and official seal of the City of Atlanta and the State of Georgia on 12th day of August, 2009

Karen C Handel Secretary of State

Laven C. Handel

Certification Number: 453,5024-1 Reference: Verify this certificate online at http://corp.sos.state.ga.us/corp/soskb/verify.asp

Office of Regulatory Staff Columbia, South Carolina



PSC Docket No.
PSC Order No.
PSC/ORS Certificate No.

2009-388-T 2009-708 0281

CLASS C - CHARTER BUS

	CTT A DOTTED BLIC CEDO					
	CHARTER BUS CERT	IFICATE				
NAME:	KELLY TOURS, INC.					
ADDRESS:	2788 HWY 80 WEST, SAVANNAH, GA 3	31408				
	(Mailing Address: 150 Glenda Drive, LaGrange,	GA 30241)				
with regard t	a charter bus passenger service, by means of motor propelled vehicles, has furnished evidence of compliance with regard to minimum amounts of financial responsibility relating to insurance requirements and safety requirements of the South Carolina Department of Public Safety.					
	BETWEEN POINTS AND PLACES IN	SOUTH CAROLINA				
		1				
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		<u>'</u>				
		ı				
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		1				
		!				
	Certificate nor the rights granted herein shall be so therwise hypothecated, unless first approved by the C					
DAT	ED at Columbia, South Carolina, this 22nd day of	f <u>OCTOBER</u> A.D., <u>2009</u> .				
		Caummi				
		Dawn M. Hipp, Director				
		Transportation, Telecommunications				
		Water/Wastewater				

Secretary of State Business Information and Services Suite 315, West Tower 2 Martin Tuther King Ir. Ar. Atlanta, Georgia 30334-1530

CONTROL NUMBER: 9621921
EFFECTIVE DATE: 07/01/1996
COUNTY : CHATHAM

REFERENCE : 0107 PRINT DATE : 07/11/1996

FORM NUMBER : 311

MARK W. NICKERSON POST OFFICE BOX 14621 SAVANNAH GA 31416

CERTIFICATE OF INCORPORATION

I, the Secretary of State and the Corporation Commissioner of the State of Georgia, do hereby certify under the seal of my office that

KELLY TOURS, INC. A DOMESTIC PROFIT CORPORATION

has been duly incorporated under the laws of the State of Georgia on the effective date stated above by the filing of articles of incorporation in the office of the Secretary of State and by the paying of fees as provided by Title 14 of the Official Code of Georgia Annotated.

WITNESS my hand and official seal in the City of Atlanta and the State of Georgia on the date set forth above.



Jewis A. Massey

LEWIS A. MASSEY

SECRETARY OF STATE

STATE OF SOUTH CAROLINA SECRETARY OF STATE

TO BE A TRUE AND CORRECT CORY

APPLICATION BY A FOREIGN CORPORATION FOR A CERTIFICATE OF AUTHORITY TO TRANSACT BUSINESS IN THE STATE OF SOUTH CAROLINA

SEP 0 4 2009

SECRETARY OF STATE OF SOUTH CAROLINA

TYPE OR PRINT CLEARLY WITH BLACK INK

Pursuant to Section 33 15 103 of the 1976 South Carolina Code of Laws as amended the undersigned corporation hereby applies for authority to transact business in the State of South Carolina and for that purpose hereby submits the following statement

1	The name of the corporation is (see Sections 33 4 101 and 33 15 106 and Section 33 19 500(b)(1) if the corporation is a professional corporation) Kelly Tours, Inc.
2	It is incorporated as (check applicable item) [] a general business corporation [] a professional corporation under the laws of the state of
3	The date of its incorporation is June 1996 and the period of its duration is
4	The address of the principal office of the corporation is 2788 HWY 80 W in the city of Granden City and the state of Georgia 31408
5	The address of the proposed registered office the state of South Carolina is # 8 In the city of Sentry Oak Lane in St. eet Add ess South Carolina 29926 Zip Code
6	The name of the proposed registered agent in this state at such address is Don Adams Print Name
	I hereby consent to the appointment as registered agent of the corporation

090627-0267 KELLY TOURS INC

FILED 06/26/2009

Mark Hammond

South Carolina Secretary of State

Signature of the Registered Agent

The initial Board of Directors of the Corporation shall be comprised of one member, being Donald C. Adams.

IN WITNESS WHEREOF, the undersigned incorporator has set his hand and seal to these Articles of Incorporation, this <u>i//(</u> day of _______, 1996.

Mark W. Nickerson (L.S.

ARTICLE. KEL

SECRETARY OF STATE

2

ARTICLES OF INCORPORATION

OF

KELLY TOURS, INC.

I.

The name of the corporation is: "KELLY TOURS, INC." (the "Corporation").

II.

The Corporation shall have the authority to issue not more than 1,000 shares of no par value, common capital stock, said shares having unlimited voting rights and being entitled to receive the net assets of the Corporation upon dissolution.

III.

The initial registered office of the Corporation shall be located at 23 South Cromwell Road, Savannah, Chatham County, Georgia 31410. The initial registered agent of the Corporation shall be Donald C. Adams.

IV.

The name and address of the incorporator is Mark W. Nickerson, BRANNEN AND NICKERSON, L.L.C., Commonwealth Building, Suite 200, 7130 Hodgson Memorial Drive, Savannah, Georgia 31406.

ν.

The mailing address of the initial principal office of the Corporation shall be Post Office Box 30699, Savannah, Georgia 31410.

a) Name of Directors	Business Address
_ Don Adams_	2788 HWY 80 W
	Garden City, GA 31408
b) Name and Office	Business Address
of Principal Officers	
Don Adams President	2788 HWY 80W
Don Adams, President Warren Hickman, General Ma	mger Garden City, 6431408
8 The aggregate number of shares which the corpo and senes if any within a class	·
Class of Shares (and Series if any)	Authorized Number of Each Class (and Senes)
100 Shares Capital Stock	
9 Unless a delayed date is specified this application Secretary of State (See Section 33 1 230)	shall be effective when accepted for filing by the
Date <u>S/11/09</u>	Kelly Tours, Inc.
	Signature
•	Don Adams Pres de nt Type o P i Name and Office



FAX COVER SHEET Pages Including Cover: 5

Date Sent: 6/15/2010

FROM:

Dawn Wheeler

Kelly Tours, Inc.

Office #: 912-964-2010 Fax #: 912-964-1006

TO:

Office Clerk

803-896-5246

Please expedite the process for the Limosine service. We have an obligation to the Savannah Airport.

Thank You, Dawn Wheeler Fleet Manager dawn@kellytours.com

